

Application for Employment

The City of Jamestown is an Equal Opportunity Employer

We consider applications for all positions without regard to race, gender, creed, religion, sexual orientation, national or ethnic origin or any other legally protected status.

PLEASE TYPE OR PRINT: Complete the entire application. If you fail to complete all questions your application will be deemed incomplete and may be rejected. You may attach a resume.

<u>may be rejected. You may attach a resume.</u>				
Position Applying For: Name (Last, First, Middle):				
Street Address: City, State & ZIP:				
Home Phone: Work Phone: (Optional)				
Cell Phone: Email Address:				
Best time to contact you? Are you eligible to work in the US?				
Can you travel if the job requires it?				
Are you 18 years of age or older? If 'No', what is your current age?				
Are you currently employed by the City of Jamestown? If 'Yes', what is your current job title?				
Have you ever been employed by the City of Jamestown?				
If 'Yes', list dates of employment & reason for leaving:				
Are you related to any current City of Jamestown employee?				
If 'Yes', their name and relationship:				
If required, do you have a valid driver's license?				
If 'Yes', State of issuance, license number and expiration date:				
How did you learn about this employment opportunity?				
Date available to work: Desired salary range (monthly):				

_				_ •			
_	М		ca		\mathbf{a}	n.	
_	u	u	La	u	u		

Name of School	City/State	Course of Study	Degree Received	Major
Other credentials; licenses, p	professional affiliations, e	tc., which are relevant to th	ne job for which you are app	olying.
SKILLS: Please list technical				
software packages of which	you have a working know	rledge and note your level o	of proficiency (basic, interm	ediate or expert).
State any additional informa	ation you feel may be help	oful to us in considering you	r application.	
Have you ever been convicto	ed of a misdemeanor or a	felony or had a deferred in	mnosition of sentence?	
If so, name charge for which	you were convicted, case	e number, offense date, cor	nviction date and jurisdictio	n.
VETERAN ELIGIBILITY: or received the armed force				
released under other than d			ing an emergency condition	i and must have been
Do you claim Veteran's Prefe	erence?			

(If 'Yes', you must attach a DD-214, Report of Separation)				
Do you claim Disabled Veteran's Preference? (If 'Yes', you must attach a DD-214, Report of Separation and a letter les disability.)	s than one year old from the US Department of Veterans Affairs indicating			
May we contact your current employer?				
WORK EXPERIENCE: Please detail your work history. Begin with sheets if necessary and please explain any gaps in employment. complete this information with the notation "See Resume". The former employers for reference information.	nclude full-time military or volunteer commitments. DO NOT			
Employer: Ac	dress:			
Phone Number: Yo	ur Job Title:			
Supervisor: Dates E	mployed:			
Starting Hourly Rate/Salary: Final	Hourly Rate/Salary:			
Work Performed:				
Reason For Leaving:				
Employer: Ac	dress:			
Phone Number: Yo	ur Job Title:			
Supervisor: Dates E	mployed:			
Starting Hourly Rate/Salary: Final	Hourly Rate/Salary:			
Work Performed:				

Reason For Leaving:
Employer: Address:
Phone Number: Your Job Title:
Supervisor: Dates Employed:
Starting Hourly Rate/Salary: Final Hourly Rate/Salary:
Work Performed:
Reason For Leaving:
Employer: Address:
Phone Number: Your Job Title:
Supervisor: Dates Employed:
Starting Hourly Rate/Salary: Final Hourly Rate/Salary:
Work Performed:

Reason Fo	or Leaving:
	If you need additional space, please reproduce this page or continue on a separate sheet of paper.
<u>REFEREI</u>	NCES:
Name:	Phone Number:
Address:	
======	
Name:	Phone Number:
Address:	
=======	
Name:	Phone Number:
Address:	
Are you a	vailable to work full-time?
Are you a	vailable to work part-time? Morning Afternoon Evening/Nights

PLEASE READ CAREFULLY AND SIGN THAT YOU UNDERSTAND AND ACCEPT THIS INFORMATION.

I certify that the information in this application and its supporting documents is accurate and complete. I understand and agree that failure to fully complete the form, or misrepresentation or omission of facts, represents grounds for elimination from consideration for employment, or termination after employment if discovered at a later date. I authorize the City of Jamestown to investigate, without liability, all statements contained in this application and supporting materials. I authorize references and former employers, without liability, to make full response to any inquiries in connection with this application for employment. If requested, I agree to submit to a physical exam, criminal and credit background investigation, and /or screening for illegal substances upon conditional offer of employment. I understand that this document is NOT an offer of employment, and that an offer of employment, if tendered, does NOT constitute a contract for continued guaranteed employment. I understand that staff employees of the City of Jamestown serve at will, and the employment relationship may be terminated at any time by either party, for any or no reason, other than a reason prohibited by law. If employed, I will be required to furnish proof of eligibility to work in the United States, to file a State security questionnaire and State loyalty oath, and to comply with company and departmental regulations. I understand that if employed on a temporary basis, I would be paid for only hours worked, and would be ineligible for benefits including paid time off. If employed on a regular, benefits-eligible basis, I understand that I would be required to make mandatory contributions to the City of Jamestown Retirement System or to an optional retirement program, if applicable. I understand that any benefits I receive may be subject to change or discontinuation at any time without prior notice. I understand that the first SIX MONTHS of regular employment represent a trial period, during which I would not be eligible to apply for transfer or promotion and during which I may be terminated without right of appeal.

Jay
ne your rvey nd
r

Thank you for your response. Your cooperation will allow the City of Jamestown to be compliant with Public Law 88-352, Title VII of the Civic Rights Act of 1964 as well as complying with rules and regulations set for the by the US Equal Opportunity Commission. For more information, please visit the official we site for the EEOC located at http://www.eeoc.gov/

You may submit the application in person at City Hall or mail the application to City of Jamestown, Attn: Jay Sveum, 102 3rd Ave SE, Jamestown, ND 58401, or by email to: jsveum@jamestownnd.gov